

APPENDIX J
DIRECTIONS FOR USE OF A MEDICATION AND INJURY LOG BOOK

I. The center medication and injury log book(s) shall be used to record the following:

- A. The administration of any medication to a child, both prescriptive and non-prescriptive.
- B. Any injury, whether minor or serious, to a child which requires any kind of treatment.
- C. Any incident involving a child that requires the services of medical personnel.
- D. Any incident that may not have resulted in a treatable injury at the time of occurrence but for which other indicators exist or there is potential of a latent injury (i.e., noted change in child's behavior, a fall from play equipment, an incident involving the head/neck, etc.).
- E. Evidence of any injury to a child received in or out of center care (i.e., unusual bruises, contusions, lacerations, burns, etc.).
- F. The department recommends that you also record any indicators of neglect in a child (i.e., infant failure to thrive, hunger, fatigue, problems in personal hygiene, etc.).

II. The center medication and injury log book shall be maintained as follows:

- A. The book must have lined pages and a stitched binding.
- B. All pages must be numbered (consecutively, front and back) in ink. Pages may not be removed.
- C. Entries shall be made in ink, and lines may not be skipped.
- D. Entries shall be dated and made on the date of occurrence.
- E. Entries shall be signed or initialed by the person making the entry.
- F. For group child care centers, records of injuries shall be reviewed by the director or designated person with staff every 6 months in order to determine that all possible preventive measures are being taken. Documentation of each review shall be recorded in the log book.

III. Entry of medications:

- A. Each time a medication is administered record the date, time, first and last name of the child, dosage, type of medication, and name or initials of person administering the medication.

Example:

4/15/05 11:30 a.m. John Smith 1 tsp. Amoxicillian RMB

IV. Entry of injuries / incidents / observations:

- A. For all situations, record the date, time, first and last name of the child, description of facts surrounding the occurrence and the name or initials of the person making the entry.
- B. As applicable for each situation, record a description of the area of the body involved, how/why the situation occurred, the location where it took place or was discovered, a description of any consumer product involved, name of the staff person responsible for the care of the child, treatment administered or any other action taken on behalf of the child and whether a parent was advised of the situation prior to picking up the child.

Examples:

4-13-05 10:00 a.m. Mary Jones fell when running on blacktop area on playground. Scraped left knee. Washed wound with soap and water and applied bandaid. Wrote note to parent; taped to cubby. DHS

4-11-05 6:45 a.m. Ann Brown arrived with bruise on right cheek beneath eye. Mother indicated she had bumped into table at home. EKW

- C. It is recommended that if an incident involves more than one child, separate log book entries be made identifying only one child per entry in order to assist in meeting requirements for confidentiality.

V. Reminders:

- A. For all medications, obtain written authorization and direction from the parent for the specified time period the medication is to be administered. Form CFS-59, Authorization to Administer Medication, is mandatory for this purpose for family child care centers and recommended for this purpose for group child care centers. **Note:** Blanket authorizations for medications as needed are prohibited except where authorized in writing by a physician (i.e. cases of asthma, allergic bee sting reactions, etc.).
- B. Recording the application of sunscreen, insect repellent, or other non-medicinal type preparations (i.e., lotions, powders or salves used in diapering, etc.) is not required in the log book. However, a written authorization from the parent—that is reviewed and updated as necessary—shall be on file for these products. Written authorizations for sunscreen and repellent must include the brand name and the strength of the product.
- C. Medications are to be returned directly to the parents or other person authorized to pick up the child if the physician's directions include overnight use. Medication is never to be given to a child to return to the parent.
- D. Medications that no longer have current authorizations and are not picked up by parents should be discarded in a manner that will not make them accessible to children.
- E. Any death of a child in care of the center, or any accident that results in an injury requiring professional medical treatment while a child is in the care of the center, must be reported to the department within 48 hours after the occurrence. Form CFS-0055, Accident Report – Child Care Centers, is available and may be used to meet this requirement.